### 2014 Message from the Air Force Personnel Center Physician Education Branch Chief

Air Force Deferred Applicants,

As you begin the application process for residency or fellowship training, I want to congratulate you for your accomplishments up to this point in your medical career. You are among the best and brightest physicians in our nation, and we are proud that you have chosen to serve in the Air Force. The Air Force Personnel Center (AFPC) Physician Education Branch stands ready to assist in any way we can to help you make the best decisions about your AF medical career.

Every year, the Air Force (AF) projects how many physicians in each specialty are required to meet the needs of the Air Force Medical Service (AFMS). This process, called "forecasting", is completed each year by the Health Professions Education Requirements Board (HPERB). The number of physician training requirements forecasted for each specialty is posted on our web page. These are the positions that will be selected at this fall's 2014 Joint Service Graduate Medical Educational Selection Board (JSGMESB). As is the case in the civilian match, some specialties are more competitive than others.

The attached application instructions are very complete. <u>Please read them thoroughly</u> prior to beginning your GME application. I would like to highlight a few issues regarding the application process.

- ❖ You are responsible for submitting all application documents into the Medical Operational Data System (MODS). Please see our website for directions on how to upload your documents into MODS. Do not mail or email any documents to Physician Education!
- ❖ Air Force Personnel Center (AFPC) Physician Education will not have an extended call for applications beyond 14 September. Please ensure you meet the deadlines for all application items to arrive to our office by 14 September.
- ❖ JSGMESB deadlines are firm. MODS will be closed after 14 September and your application will not meet the JSGMESB if your application is incomplete. Scanned or mailed hard copy applications will not be accepted. It is your responsibility to meet the deadlines.
- ❖ If you are selected for GME, you must meet all conditions prior to being released to GME. Those conditions include passing USMLE/COMLEX Step 3/Level 3 for interns.
- \* For previous JSGMESB applicants, due to automation processes, AFPC Physician Education requires you upload new copies of Dean's letters, transcripts and USMLE/COMLEX scores into MODS. Even if you sent copies in previous years, you are responsible for obtaining a copy of these items and uploading them into MODS. Members are encouraged to maintain copies for their personal files for future use and any future GME applications.
- ❖ Applicants must apply to, and be selected by, the 2014 JSGMESB to enter a GME program. The training opportunities available at the JSGMESB are specific-in terms of the number of training years, locations, and funding. Active duty service commitments (ADSC) will vary according to the type of funding (AD program, civilian sponsored or civilian deferred) and the existence of previously incurred educational ADSC. Applicants may not seek residency or fellowship training that contains an MPH curriculum unless already approved by the HPERB.
- Current interns (post-graduate year 1, PGY1) selected for residency training will be required to have taken the USMLE Step 3/COMLEX Level 3 by 15 Mar 2015. Although a Step 3/Level 3 score is not required at the time of the JSGMESB, a specific test date to take the examination will be required as a part of the JSGMESB application. Applicants must provide AFPC Physician Education their Step 3/Level 3 scores NLT 30 Apr 2015. If selected for GME, the selection will be contingent upon passing Step 3/Level 3.

- Applicants applying for, or who wish to be considered for, civilian training should enter the appropriate civilian match process. Applicants must withdraw from the match if selected for training in an AD program by the JSGMESB.
- When applying for civilian sponsored training and interviewing with civilian programs, you should provide a copy of the AFIT Training Agreement (TA), in advance, to the prospective civilian institution, to ensure they can agree to the terms and to prevent later delays in processing your GME assignment. Please direct any questions regarding the <u>content</u> of the TA to the AFIT POC listed on the first page of the agreement. The AFIT TA can be found on the AFPC Physician Education website.
- Applicants selected for civilian training, who secure a program in CA, must be aware that CA mandates all trainees to possess an active CA medical license prior to training start. Plan accordingly.
- Civilian programs under the jurisdiction of LA County (LAC)/Univ of Southern California require a separate Training Affiliation contract, in addition to the AFIT TA. Please refer to the section of this application under Civilian Sponsored Training, paragraph c, for additional guidance.
- ❖ You must complete an interview (preferably in person) with one active duty AF Program Director (or Consultant if the AF does not have a program) in the specialty you are applying, regardless of whether you are applying for an AD, civilian sponsored, or civilian deferred GME program.
- ❖ AF Program Directors/Consultants may only review a copy of your Department of Defense (DoD) application and curriculum vitae (CV). They may not request additional materials such as photographs, essays or letters of recommendation.

These remarks are meant to highlight some key points. There is additional detailed information in the instructions accompanying the application forms. We have teamed with the AFPC Total Force Service Center to provide 24/7 assistance via the myPers website and their telephone line. You may contact them at 800-525-0102 or <a href="https://mypers.af.mil">https://mypers.af.mil</a> for application assistance. For additional assistance, you may contact my staff at DSN 665-2638, 210-565-2638 or 800-531-5800. My Program Managers stand ready to assist you with your application. I wish you the best with your application and your future GME training endeavors!

Michael S. Tankersley, MD

MICHAEL S. TANKERSLEY, MD FAAAAI, FACAAI, FAAP Chief, Physician Education Branch

**NLT 31 January 2015** 

### **United States Air Force**

# 2014 Joint Service Graduate Medical Education Selection Board (JSGMESB) Application http://www.afms.af.mil/physicianeducationbranch/index.asp

Program Manager contact information:

DSN 665-2638

Written notice to all applicants

Commercial 210-565-2638 Toll free 800-531-5800 Fax: 210-565-2830

Email: afpc.dpame@us.af.mil

24/7 Application Support AFPC Total Force Service Center: 800-525-0102

Summary of the 2014 JSGMESB Timelines	Deadlines
All items must be uploaded into the Medical Operational Data System (MODS).	
DO NOT MAIL/EMAIL DOCUMENTS	
1. DoD two-page application for GME (DPANE Form 4117)	
You must also send the 2-page DoD Application and CV to all AF Program Directors (or Consultant if no AF program exists) in the specialty you are applying.	14 September 2014
2. Curriculum vitae (CV)	Note: Once you have
3. Current, unrestricted medical license	uploaded an application
<ol> <li>USMLE Step/COMLEX Level 1, 2, and 3 scores (copy of original official board transcripts)         You must submit all board test scores to include failed scores. If you are retaking the         Step/Level 3 you must send Physician Education your retake test date.</li> <li>Step 3/Level 3 intention form (if applicable)</li> <li>Medical student performance evaluation (MSPE) – formerly known as Dean's Letter</li> <li>Official copy of medical school transcript (including degree award date)</li> <li>Two personal letters of recommendation</li> </ol>	document into MODS, you will receive an automated email acknowledging entry of your document. Contact Physician Education if you have not received an email
9. Personal essay	after 2 weeks of uploading
10. Second choice form	your document(s).
11. <b>Weight statement</b> (Please ensure statement is <u>signed</u> and <u>dated</u> by a certifying official)	y our document(s).
12. Statement of understanding	
13. Reserve component health risk assessment (RCHRA)	
Must be completed and signed by applicant and fully licensed M.D. or D.O.	
Last day for requests for training <u>location</u> changes Applicants may request a change to training <u>location</u> (not specialty) preferences.  -All changes must be submitted via email and on the second page of the DoD application for GME (DPANE Form 4117)  -No changes will be made by telephone	15 October 2014
14. Current Program Director recommendation form (if currently in training)	
15. <b>Previous Program Director recommendation form</b> (for each program previously attended)	15 October 2014
16. Program Director/Consultant interview sheets (uploaded into MODS by PD/Consultant)	
Last day for applicants to withdraw application (Must submit request via email to Physician Education)	1 November 2014
JSGMESB selection results released via email	17 December 2014

### **JSGMESB Checklist for Success**

This checklist outlines all documentation required to complete the JSGMESB application. Please review the JSGMESB Overview and Application Guidance sections for detailed explanations/instructions on each requirement. **All application documents MUST be typed and uploaded into MODS** (fax/email/hard copy documents will not accepted).

The following documents are due 14 September 2014 <u>and</u> must be uploaded into MODS by the applicant
1 DoD two-page application for GME (DPANE Form 4117)
2CV
3 Current, unrestricted medical license (applies to residents/fellows PGY3+ and field applicants)
4 Copy of USMLE Step/COMLEX Level 1, 2, and 3 scores (official USMLE or NBOME transcripts only; web score reports will not be accepted)
5 Step/Level 3 intention form (if applicable)
6 Medical student performance evaluation (MSPE, formerly known as Dean's letter)
7 Official copy of medical school transcript (including degree award date)
8 Two personal letters of recommendation
9 Personal essay
10 Second choice form
11 Weight statement (Please ensure statement is signed and dated by a certifying official)
12 Statement of understanding
13 Reserve component health risk assessment (RCHRA)
The following documents must be uploaded into MODS NLT 15 Oct 2014:
Current Program Director evaluation form (if currently in training)
Previous Program Director evaluation form (for each program previously attended)
Program Director/Consultant interview sheet (complete your interview <b>NLT 10 Oct 2014</b> ; PDs/Consultants will forward the interview sheet directly to Physician Education)

### **Section 1: JSGMESB Overview**

Deferred Graduate Medical Education (GME) Application

Please read all instructions prior to completing any part of the application package. Compliance with these instructions will expedite the processing of the application and afford the opportunity for GME selection.

### **Training Opportunities**

The Health Professions Education Requirements Board (HPERB) convened 20 May 2014 and identified GME training opportunities based on AF requirements. Only apply for training in specialties that have training requirements identified. If a desired specialty is not listed in the HPERB results, do <u>not</u> submit a GME application. If an application is received for a specialty not identified in the HPERB results, the application will be returned without action and will not meet the JSGMESB.

An applicant may not enter GME (this includes extended training such as <u>RESEARCH</u>) unless he/she has applied to and has been approved for training by the JSGMESB. The results of the HPERB indicate a specific start year for training. Some training is approved two years in advance. Please pay particular attention to the specific start dates identified by the HPERB.

Applicants applying for HPERB-approved civilian training <u>must</u> request training in specialties reviewed and approved by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association (AOA). Applicants are encouraged to review the American Medical Association's FREIDA Online and information published by the AOA for Osteopathic Training Programs. Applicants may not apply for dual programs (e.g. Med/Peds) not approved by the HPERB. A copy of the HPERB results is posted at <a href="http://www.afms.af.mil/physicianeducationbranch/index.asp">http://www.afms.af.mil/physicianeducationbranch/index.asp</a>.

Applicants applying for HPERB-approved civilian training should enter the <u>National Residency Match</u> <u>Program or its osteopathic equivalent</u>. Fellowship applicants will need to refer to the <u>2014 Specialties</u> <u>Matching Service</u> schedule to enter the match. If selected for a military GME program, applicants <u>must</u> <u>withdraw</u> from the match. The JSGMESB release date is <u>17 December 2014</u>.

Applicants must understand that if selected for training, the training will begin and end at the same training institution. Requests to divide training between two or more facilities (whether it is a request to PCS or the member's offer to pay for moving expense) will NOT be approved.

Applicants must rank ALL active duty (AD) GME programs in which the HPERB has authorized training for the respective specialty in which applying (e.g. Internal Medicine applicants MUST rank SAUSHEC, Wright-Patterson/Wright State, Keesler and David Grant/UC Davis on page two of the DoD application for GME).

### **Fellowship Training**

a. Board certification in the applicant's primary specialty is required to apply for and enter fellowship training. In some instances, applicants will not have had an opportunity to obtain board certification (e.g. applying to enter fellowship immediately following residency training or specialties that take two to three years post-residency graduation to obtain certification). Staff physicians who have not obtained board certification will require a waiver to the JSGMESB. This waiver will be prepared by Physician Education. Board certification waivers are considered on a case by case basis. Board eligible staff physicians who have not attained board certification must address this in the last paragraph of their statement.

b. All sponsored fellowships will incur a <u>consecutive</u> (not a concurrent) ADSC. Fellowships at military training facilities incur a consecutive obligation to any unfulfilled <u>GME</u> ADSC (i.e. a residency ADSC). Fellowships in civilian sponsored status incur a consecutive obligation to the longest medical education and training ADSC the member has prior to entry into GME. ADSC obligation is not paid off while in GME training.

### Applicants Currently in PGY1-only Training and Current Residents Selected for Fellowship Training

Current interns in an internship-only program from 2014-2015 are encouraged to re-apply to the 2014 JSGMESB for consideration for categorical residency with a 2015 start. If selected for additional GME, applicants will be expected to successfully meet all requirements of their current program before being released for further training. It is **not** expected that applicants will report to orientation on established reporting dates. Release from your current GME training program will be effective the date you meet completion requirements. **Applicants should expect to report later than those not coming out of GME.** You will be instructed to have the Program Director submit documentation to Physician Education regarding the specific date you have met the requirements. This will establish your new reporting date.

### **Active Duty Military Training**

Applicants are reminded that individuals selected for AD military programs incur for the length of training, <u>year-for-year commitments to be served concurrently</u> with the remaining HPSP or Financial Assistance Program (FAP) commitment. In some instances where the commitment for the program is longer than the sponsorship commitment, applicants will incur the extra obligation (e.g. 4-year HPSP student who is selected for a 7-year neurosurgery residency).

### **Deferred (Non-sponsored, Unfunded) Training**

AF training requirements may exceed the availability of sponsorship. For certain specialties, an option may be available to request training in deferred civilian status. Physicians applying to civilian training programs do not need an acceptance letter prior to the JSGMESB. Individuals may choose to speak with civilian Program Directors prior to the JSGMESB but must make it clear to each Program Director that acceptance of any training offer is contingent upon official written notification by the Air Force following the JSGMESB. Applicants negotiating with their current Program Director or other programs that have a tentative offer in writing may upload into MODS a "Good Faith" letter for inclusion with their application. This letter does not guarantee selection but shows the JSGMESB that should you be selected, you have secured a program. Civilian programs are limited to the continental United States.

## Physicians requesting deferred training should carefully consider the following factors when deciding to accept a JSGMESB offer for training in a non-sponsored, unfunded status:

- a. If an offer of deferment for training is made, the applicant must understand that he/she will continue in the non-participating Individual Ready Reserve (IRR) in order to enter additional training. Members are considered in a leave of absence status during training with a remaining obligation to the AF for any previous costs expended (e.g. ROTC, USAF Academy, HPSP, and/or FAP). If you are selected for a civilian deferment, you receive a salary from the training institution.
- b. Applicants selected for deferred training must fund their move if the training is located somewhere different from their current training location.
- c. Upon completion of deferred training applicants will enter AD in the specialty in which they trained under the deferment program. Upon entry, they will begin fulfilling any remaining medical education/training ADSC incurred prior to separation.

- d. Important: Applicants listing deferred training as their first choice when there are AD locations available at the JSGMESB must indicate their reasons for doing so. If extenuating circumstances exist, you must provide source documentation (e.g. an ill parent, family member, etc).
- e. Applicants **cannot moonlight as an obligated officer while in deferred status.** Members and their Program Directors will be required to annually sign a statement to this effect. See section on moonlighting.
- f. Time spent in deferred status does not count toward time in service for retirement.
- g. Applicants selected for deferred training starting in **2015** must provide an original letter of acceptance for that program by **10 April 2015**. Do not submit a letter of acceptance from more than one training facility. Letters of acceptance must be from the Program Director indicating the training specialty as well as the start and graduation date of training. If Physician Education does not have a letter of acceptance by **10 April 2015**, the offer to enter training may be withdrawn.
- h. Current deferred residents in their second postgraduate year <u>must have</u> Step/Level 3 results by <u>1 November</u>. If you have taken Step/Level 3 and have not provided a copy to Physician Education, then your GME application checklist will reflect the fact that this requirement has not been met. If you have a copy, upload it into MODS or if not, request it as soon as possible so as not to delay completion of your application. GME selection is based on points. Applications that do not contain USMLE/COMLEX scores will not be awarded the points associated with the scores, i.e., USMLE/COMLEX Step/Level 3 points can range from 0 to 15 points. These points cannot be awarded if these scores are not in the application.
- i. Applicants who have <u>completed</u> their second postgraduate year (PGY2) <u>must possess</u> a current, unrestricted state medical license. Please ensure that your current license specifies the <u>state</u> where licensed and the license <u>expiration date</u>. <u>Note Applicants who have completed their PGY2 may not meet the JSGMESB without a current unrestricted state medical license</u>. A training/resident's license is not adequate to meet this requirement. Please ensure your license is <u>current</u> and that you regularly renew it so that it is <u>ALWAYS</u> current the remainder of your training and subsequent AF career.

### **Civilian Sponsorship Training**

- a. Applicants selected for civilian sponsored training will enter AD, be assigned under the command of the Air Force Institute of Technology (AFIT), entitled to AD benefits, and paid an AF salary. As such, time spent in civilian sponsored status will count toward time in service, time in grade, and promotion just as if the member was at a military facility. AD physicians are prohibited from receiving a salary, stipend, or other monetary benefits from the civilian institution for his/her services as a resident or fellow. DoD and AF instructions prohibit off-duty employment/moonlighting while in GME training regardless of the civilian institution's policy.
- b. Physicians applying to ACGME or AOA accredited civilian training programs prior to the JSGMESB do not need an acceptance letter as a part of their application. Individuals may negotiate with Program Directors prior to the JSGMESB but must make it clear to each Program Director that acceptance of any training offer is contingent upon official written notification by the AF following the JSGMESB. Applicants may seek programs in ACGME or AOA accredited civilian programs in the continental United States only. Final AF approval is contingent upon approval of the specific civilian training program including length and location of rotations away from the parent institution.

- c. Applicants should provide a copy of the AFIT Training Agreement (TA), in advance, to the prospective civilian institution, to ensure they can agree to the terms and to prevent later delays in processing the assignment. Please direct any questions regarding the content of the TA to the AFIT POC listed on the first page of the agreement. If the applicant is selected to enter civilian sponsored training, the TA will need to be signed/executed between the AF and civilian institution. No TAs should be signed/executed prior to selection by the JSGMESB. The AFIT TA can be found on Physician Education website:

  https://kx.afms.mil/afphysicianeducation NOTE: Programs under jurisdiction of LA County (LAC)/U of Southern Cal require a separate Training Affiliation contract (not the standard AFIT TA.) This is an LAC requirement and is initiated by LAC. Legal coordination of this agreement can typically take weeks or months. Because of LAC's requirement, you will not be released for assignment until final disposition of this agreement is made. If you intend to apply to LAC programs, please keep in mind the timeframe in obtaining a signed LAC contract. Also, to avoid delays in assignment processing, ensure the appropriate individual has legal authority to sign contractual agreements. Often times, the Program Director may not have this legal authority.
- d. Applicants selected for civilian sponsorship training starting in 2015 must provide an original letter of acceptance for that program by 10 April 2015. Do not submit a letter of acceptance from more than one training facility. Letters of acceptance must be from the Program Director indicating the training specialty as well as the start and graduation date of training. Additionally, sponsorship TAs will also be due by 10 April 2015. The TA will be provided by Physician Education to the applicant to send to the training facility. If Physician Education does not have a letter of acceptance and sponsorship training agreement by 10 April 2015, the offer to enter training may be withdrawn.
- e. Applicants who have been offered and have accepted civilian sponsorship are encouraged to seek positions in programs which have affiliations with Veterans Administrations facilities.
- f. Per AFI 36-2107, Table 1, civilian sponsored training (residency/fellowship) incurs a <u>consecutive</u> obligation for <u>each</u> year of training, with a minimum of two years obligation. Therefore, individuals selected for only one year of civilian sponsored training will incur two years of consecutive ADSC. Two years sponsorship incurs two years ADSC and so forth. This civilian sponsored residency or fellowship ADSC is consecutive to the <u>longest</u> medical education/training commitment the member has preexisting. In other words, you will begin fulfilling it AFTER your longest ADSC for medical education/training. Contrary to civilian sponsored training, residency training in an <u>AD facility</u> (AF, Navy, Army) incurs a year for year <u>concurrent</u> ADSC. As a reminder, no medical education/training service commitment may be fulfilled during GME training status. AD <u>fellowship</u> ADSCs are <u>consecutive</u> to any remaining GME ADSC one has (e.g. <u>residency</u> ADSC.)
- g. In some instances, a civilian program may offer you a "Good Faith" letter indicating that the program is willing to accept you if selected by the JSGMESB. This letter does not guarantee selection by the JSGMESB but does show you have an accepting program. You may upload into MODS the "Good Faith" letter as a part of your application.

### Training in an Army or Navy Program

Training in an Army or Navy program requires funding from the AF. If the **2014** HPERB approved an Army or Navy facility as a training location, an applicant is able to request consideration for placement at that facility on page two of the JSGMESB application. If a specialty is soliciting civilian sponsorship as a training location <u>and</u> there is availability at an Army or Navy program, the applicant may request consideration for an Army or Navy program. However, the Army or Navy must be offering training in that specialty for the same year as approved by their HPERB-equivalent process. In situations where the HPERB did not approve an Army or Navy facility but did offer civilian sponsorship, <u>it is the applicant's responsibility</u> to contact the respective Army or Navy Program Director to determine training availability and program capacity. If the HPERB did not approve

placement in an Army or Navy program and if civilian sponsorship is not available to convert to an Army or Navy facility, then the applicant should not rank Army or Navy programs. Again, applicants must rank <u>all</u> AD AF GME programs in which the HPERB has authorized training for the respective specialty in which applying (e.g. Internal Medicine applicants MUST rank SAUSHEC, Wright-Patterson/Wright State, Keesler <u>and</u> David Grant/UC Davis on page two of the DoD application for GME).

### **Statement of Understanding**

If selected by the 2014 JSGMESB, physicians will be required to work in a clinical capacity (in the specialty in which they trained) for at least two years after GME completion unless the AF/SG waives this requirement due to the needs of the AF mission.

### **Active Duty Service Commitments (ADSC)**

ADSC is governed by US Code, Title 10 and AFI 36-2107 and varies depending on the length of sponsorship. An ADSC cannot be fulfilled while in GME training and is calculated based on completion dates.

Individuals selected for AD programs incur a year for year ADSC <u>after the initial internship year</u>. The initial internship year in an AD program is ADSC neutral. This GME ADSC is served <u>concurrent</u> (i.e. at the same time) with the ADSC for HPSP or USUHS.

Similar to AD programs, civilian sponsored GME programs incur a year for year ADSC though the initial internship year is <u>not</u> ADSC neutral. In addition, a civilian sponsored ADSC is served <u>consecutive</u> (i.e. in addition to the previous ADSC). See the table below for GME residency examples.

### **Training Length Completion Dates**

Type of training:	Military Program*	Civilian Sponsored**
Length of program:	(5 years)	(5 years)
Start date:	1 Jul 2014	1 Jul 2014
Graduation date:	<b>30 June 2019</b>	<b>30 June 2019</b>

Previous ADSC	Completion of ADSC	Completion of ADSC
USAFA + USUHS	30 June 2031	30 June 2036
12 year ADSC	30 Julie 2031	30 June 2030
ROTC + USUHS	30 June 2030	30 June 2035
11 year ADSC	30 June 2030	50 June 2055
USUHS	20 Inn a 2026	20 Inno 2021
7 year ADSC	30 June 2026	30 June 2031

#### Notes:

- $*Military\ GME\ does\ not\ incur\ a\ longer\ ADSC\ than\ the\ previous\ ADSC\ though\ GME\ ADSC\ served\ \underline{concurrent}\ to\ a\ previous\ ADSC\ and\ an analysis of the previous\ ADSC\ though\ GME\ ADSC\ served\ \underline{concurrent}\ to\ a\ previous\ ADSC\ and\ an analysis\ an analysis\ and\ an analysis\ an analysis\ and\ an analysis\ an analysis\ and\ an analysis\ an analysis\ an analysis\ and\ an analysis\ an analy$
- \*\*Civilian sponsored GME residency training incurs an ADSC served consecutive to a previous ADSC
- 1. If incurring a longer ADSC is a consideration factor for you, **<u>DO NOT</u>** rank programs that will result in extending your current ADSC date.
- 2. Ranking programs indicates you are willing to incur a longer ADSC as indicated above for the double asterisked scenarios.
- 3. If you rank and are selected for a training program approved by the JSGMESB, you will not be allowed to switch to another program after the JSGMESB.

#### Selection as an Alternate

- a. There are instances when an applicant is selected as an alternate by the JSGMESB. This means that if a primary selectee should decline training (or for some reason is unable to accept their selection) the alternate may be afforded the opportunity to accept/decline training.
- b. In the event you are selected as an alternate, you will be given the opportunity to accept or decline alternate status. While activation may occur at any time, activations beyond February 2015 are unlikely, after all

primaries have accepted the training offers. Physician Education will provide alternates with a written offer if an instance occurs that the primary selectee's status has changed.

c. Traditionally, if an applicant indicates a second specialty choice and is selected as an Alternate for the first choice specialty, the application is not forwarded to the second choice specialty panel <u>unless</u> the applicant indicates otherwise in section 5 on the "Second Choice Form."

Example: The applicant's first choice is General Surgery and second choice is Orthopedic Surgery. The applicant is selected as an alternate for General Surgery. The application will not be automatically transferred to the Orthopedic Surgery Panel for review since the applicant has a disposition from the JSGMESB (alternate for General Surgery).

1. If the applicant would rather be considered for Orthopedics (above example), then they should decline an alternate status in Section 5 of the "Second Choice Form". The application would then be transferred to the Orthopedic Surgery Panel for review.

### Resignations

Physicians in training programs who want to change specialties must first resign from the current training program before applying for another GME program. According to AF Policy, students who resign will not be considered for further GME until they have completed a field assignment (at least two years at a CONUS assignment or one year remote tour, if applicable.) Air Staff Policy outlines that physicians who resign from a categorical program will be assigned to the field as a flight surgeon or general medical officer. Physicians are strongly encouraged to re-apply for future Selection Boards.

### **Off-duty Employment/Moonlighting**

In accordance with the DoD Policy and AFI 44-102, 1.9.4, <u>applicants are not authorized to moonlight</u> during GME training. Obligated AF officers are required to comply with all DoD and AF regulations. In some instances these requirements vary from non-obligated AF peers. <u>Physician Education has the authority to remove you from training in the event a member engages in off-duty employment/moonlighting during GME.</u>

### "How Many Applications?" Question

Quite often Physician Education will receive the question "how many applicants, in my specific specialty, will be meeting this JSGMESB?" Physician Education does not release this information to applicants since the number is arbitrary in nature, and does not give a true sense of the applicant pool, number of waivers, eligibility, qualifications, quality of applications, etc. From an administrative standpoint, you are highly encouraged to make your application <u>complete</u> to ensure it is as competitive as possible. Also, make certain you meet all the administrative requirements as outlined in these application instructions and GME checklist.

### Withdrawal of Application or Non-Selection

In the event you should withdraw your GME application, are not selected for training or not activated as an alternate, then be prepared to enter AD upon completion of your training to begin fulfilling your total ADSC. All requirements for GME, especially the USMLE/COMLEX Step/Level 3 and current, unrestricted state medical licensure are also pertinent to the AF assignments process.

<u>Note:</u> Applicants may apply to a future JSGMESB to re-enter GME after serving/meeting time on station requirements for an operational/field tour (i.e. 24 months if a stateside assignment, 12 months if a remote assignment or 36 months for an overseas long tour).

### **Section 2: 2014 JSGMESB Application Instructions**

Required Elements for the Deferred GME Application

Please read all instructions before completing any part of the application. Applicants must comply with all requirements if they wish to be considered for GME selection.

All elements of the GME application to be uploaded into MODS must be typed, single sided (**no front/back documents**) on plain bond paper. No handwritten documents will be accepted by the JSGMESB. All documents with the **14 September 2014** deadline must be uploaded into MODS.

### General information

- a. If an applicant attended any previous training under a different name, please include the name in parenthesis on the DoD application form and the Curriculum Vitae.
- b. Submitted application materials are for JSGMESB and Physician Education use only. These items are considered board sequestered and copies will not be furnished to the applicant or any third party requestor. Please plan accordingly if/when applying to or accepting offers from civilian institutions that requires a separate application process. Applicants are reminded they should keep a copy of their application package. Physician Education will not provide applicants, interviewers or other agencies a copy.
- c. Please ensure the original, signed application is uploaded into MODS on or before 14 September 2014. Please do not delay in submitting an application as MODS will be closed for submission of these documents after 14 September 2014.
- d. Faxed, emailed, mailed or hand-written DoD applications/supporting documents for the JSGMESB will <u>not</u> be accepted. Applications and ALL supporting documents must be <u>uploaded into MODS</u> with an original signature. There is no exception to this policy so, again, do not email, fax or mail any application item.
- e. The required application documents not uploaded into MODS by **14 September 2014** will not be considered by the JSGMESB.
- f. This is a triservice GME selection board; all forms <u>are standardized</u>. When downloading from your email or the Physician Education website, do <u>not</u> change, alter, or deviate from the original format. Download and complete the application documents on your personal computer. Print the completed documents and upload the original, <u>signed</u> copies into MODS. Do not change the format of any forms or try to submit this application via email, fax or hard copy. Compliance with these instructions will expedite the processing of your application and afford the applicant the opportunity for selection for GME. All GME documents must be typed.

### **Contact Information**

Applicants should notify Physician Education of any changes in contact information to ensure timely receipt of documents and application statuses. In order to expedite notifications and delivery, Physician Education sends electronic checklists to applicants regarding application status. The applicant is encouraged to include business and personal email addresses with the application to ensure timely receipt of notifications.

### **DoD Application for GME (DPANE Form 4117)**

a. The applicant will receive an automated email checklist each time there is an administration change to the

application (i.e., documents received, etc) by Physician Education. Do not contact our office unless you have not received an automated email acknowledging receipt of your application document within two weeks of uploading it into MODS.

- b. Supporting documents must be typed and printed on one side only on plain white bond paper and uploaded into MODS. Hand-written application will not be accepted. Some documents will be completed within MODS but all other documents must be uploaded by the applicant.
- c. The two-page DoD application for GME (DPANE Form 4117) must be completed within MODS. It cannot be found on any other website. This form is being used by ALL participating services Air Force, Army and Navy. You will be able to complete this application within MODS but will need to use the form in this application to send to Program Directors/Consultants.
- d. Deferred physicians will complete items 1-15 and 17-24. Most items are self-explanatory. The following helpful hints are provided when completing your DoD Application for GME (DPANE Form 4117):
  - You must include at least <u>one</u> valid email address in Block 10 and no more than three (one business, one personal, etc). All correspondence will be sent directly to all addresses listed.
  - Block 12 You may list only one specialty choice. The second choice form must be completed if you wish to be considered for a second specialty.
  - If your GPA or school ranking is unknown, indicate UNK. The panel reviews Dean's Letters/transcripts for awarding points.
  - Block 16 This is non-applicable for deferred physicians
  - Block 17 Do not forget to indicate Yes or No and indicate your board certification date.
  - Block 18 Your application must contain copies of USMLE/COMLEX Steps/Levels 1, 2, and 3.
  - Block 20 This only applies to applicants that have previously served on AD as a physician (i.e. you are currently in redeferred status).
  - Block 23 Applicants must rank ALL AD GME programs in which the HPERB has authorized training for the respective specialty in which you are applying. Please see additional notes below regarding Block 23.
- e. Block 23: Applicants are able to list training location preferences (*up to 6 choices only*). In order to be considered for a particular HPERB approved training location, the applicants <u>must</u> indicate their preference(s) in Block 23. You are required to rank order all AD training locations, if offered (e.g. Internal Medicine applicants MUST rank SAUSHEC, Wright-Patterson/Wright State, Keesler and David Grant/UC Davis on page two of the DoD application for GME). Applicants are reminded that AF programs have priority and are filled <u>before</u> offering civilian sponsorship or continued deferment. Despite an applicant's preference for civilian training, the AF may require that they train in an AF program. Do not choose locations that are not approved by the HPERB even if they may be available with the Army or Navy. Exception: see above section titled, "Training in an Army or Navy Program".
- f. Block 23: Note the difference between applying for Civilian Sponsored and Civilian Deferred status:
  - 1. Civilian Sponsored: If selected, you are on paid AD status while training in a civilian facility to which you have applied and been accepted. While sponsored, you will incur an additional ADSC which will be <u>consecutive</u> with any previously existing ADSCs. Your time in training <u>does count</u> towards retirement and for pay purposes, but you may not accept any salary from the training institution.

- 2. Civilian Deferred: Continued deferment in a civilian facility. While in deferred training, you <u>will not</u> incur any additional ADSC nor <u>pay off any of your current</u> ADSC. Your time in the program <u>does not count</u> towards retirement or for pay purposes. You receive your salary from your training institution.
- g. Personal photos are not authorized with the GME application and should not be uploaded into MODS.

### **Curriculum Vitae (CV)**

The applicant is required to follow the GME format exactly. This application is meeting a triservice board and must be standardized. Please do not modify (i.e. change fonts/pitch, remove dividing lines, re-arrange sections, etc.) or your CV will be returned for corrections. **DO NOT DELETE ANY SECTIONS**, to include Spouse section (regardless of marital status). If a section does not apply, simply annotate "N/A". The CV located in Section 3. You may, however, create more space within a specific block if need be (e.g. adding lines for more military assignments).

**Current, Unrestricted Medical License** (see Table 1) Please do not upload into MODS a copy of the licensing certificate unless the expiration date is listed. Internet verifications or a copy of a wallet card is preferred.

Table 1 Applicants must submit results of ALL attempts to pass any USMLE/COMLEX Step/Level exam

	USMLE/COMLEX STEP/LEVEL 1	USMLE/COMLEX STEP/LEVEL 2	USMLE/COMLEX STEP/LEVEL 3	UNRESTRICTED MEDICAL LICENSE
Intern PGY1	Yes	Yes	Test NLT 15 Mar 2015 Results NLT 30 Apr 2015	No
PGY2 resident	Yes	Yes	Yes (see Note 1)	Required by end of PGY2 year
PGY3 resident and above	Yes	Yes	Yes (see Note 1)	Yes (see Note 2)
Staff physician	Yes	Yes	Yes	Yes (see Note 3)

<sup>\*</sup> Note 1: If the applicant has failed Step/Level 3 and not subsequently passed that Step/Level, the applicant is ineligible to apply.

**USMLE Step 1/COMLEX Level 1** Upload into MODS a copy of your official transcripts as a part of your JSGMESB application package (Table 1).

**USMLE Step 2/COMLEX Level 2** Upload into MODS a copy of your official transcripts as a part of your JSGMESB application package (Table 1).

### **USMLE Step 3/COMLEX Level 3**

Upload into MODS a copy of your official transcripts as a part of your JSGMESB application package (Table 1). Current residents in their second post graduate year (PGY2) of residency must have Step 3 results as a part of their application package or they will be ineligible to meet the JSGMESB.

### **Step/Level 3 Intention Form** (if applicable)

Current interns must have <u>scheduled</u> USMLE Step 3/COMLEX Level 3 prior to the submission of their JSGMESB application. This date must be entered on the **Step/Level 3 Intention Form** (template included in section 3). Step/Level 3 must be <u>taken</u> prior to **15 Mar 2015**. If selected, the GME training offer and approval to enter GME is <u>contingent</u> on obtaining passing results NLT **30 Apr 2015**. Individuals will not be released for

<sup>\*</sup> Note 2: PGY3s and above that do not possess a valid, unrestricted medical license will be ineligible to meet the JSGMESB.

<sup>\*</sup> Note 3: Staff physicians that do not possess a valid, unrestricted medical license will be ineligible to meet the JSGMESB.

GME assignment without passing Step/Level 3 results. You must plan accordingly as there are <u>no</u> exceptions to this requirement. Once your scores are received, mail a copy to Physician Education.

### Medical School Performance Evaluation (formerly known as Dean's Letter)

The official Medical Student Performance Evaluation (MSPE) <u>must be uploaded into MODS</u> by the applicant. Applicants should ensure that a MSPE is uploaded into MODS for inclusion in the application. This document is extremely important to the JSGMESB application. If you have previously applied to the JSGMESB, you will still be required to submit a copy of the Dean's Letter as a part of your application package. Members are encouraged to maintain a copy for their personal files for future use and future JSGMESB applications.

*Note:* If a U.S./foreign medical school graduate is unable to obtain a Medical School Performance Evaluation due to extenuating circumstances, the applicant must write a brief, signed memorandum explaining the circumstances. This memorandum should be uploaded into MODS in place of the Medical School Performance Evaluation. Please understand your Medical School Performance Evaluation is used for scoring purposes and the absence of this document in your application could adversely affect your score.

### Official Copy of Medical School Transcript

The official transcript must be <u>uploaded into MODS by the applicant</u>. Members are responsible for requesting a copy of their transcripts to include in their JSGMESB application package. If you have previously applied to the JSGMESB, you will still be required to submit a copy of the official medical school transcript as a part of your application package. Members are encouraged to maintain a copy of the official final medical school transcript for their personal files for future use and future JSGMESB applications. It is <u>the applicant's</u> responsibility to make sure the MSPE and medical school transcript have been uploaded into MODS.

### **Two Personal Letters of Recommendation**

Letters must be original with original signature written and <u>dated within 6 months of the application</u> and limited to one page (to include signature block). Letters from previous applications will not be used. Carefully consider who will submit a letter of recommendation. <u>If the applicant uploads more than two letters into MODS</u>, the <u>extra letter(s) will be automatically discarded</u>. Do not request more than two individuals to write letters and later request to "switch out" letters. Both letters of recommendation must be uploaded into MODS by the applicant and should not be submitted under separate cover. Thus, you will need to request the letters be sent to you so that you can upload the letters into MODS.

The author of the personal letter of recommendation must NOT be in any of these roles:

- 1. Current or previous Program Director or Associate Program Director from a program in which you previously trained
- 2. Sitting Program Director or Associate Program Director in the specialty in which you are applying
- 3. Sitting AF Consultant in the specialty you are applying
- 4. Any member of the JSGMESB Management Level Review or Board President's panel

If a personal letter of recommendation is uploaded into MODS as a part of your application package by any of the above individuals, it will not be accepted. There is no standard format for the personal letter of recommendation. The author may address the letter to the JSGMESB.

### **Personal Essav**

Required from all applicants and must be no more than 1 page (**double spaced, Times New Roman, 10 or 12 font size, and 1 inch margins**). Ensure your name is included on the essay. The essay must be current. Physician Education cannot use essays submitted with previous JSGMESB applications. The board is greatly influenced by this essay. Using a four paragraph concept, outline personal/professional plans and goals, why

you want to train in a particular specialty, and what strengths you bring to that specialty. If you have any extenuating circumstances for the JSGMESB to consider, communicate these in your last paragraph. Examples of extenuating circumstances include, but are not limited to, marriage to a member of the AF or another service; a spouse in a training program not affiliated with the AF (a statement from your spouse's training program is required to substantiate their presence in the program); a parent with a terminal illness (medical documentation is required from the treating physician with the diagnosis and prognosis); and a family member enrolled in the EFMP/Special Needs program (documentation from the EFMP office required). You should also mention these circumstances during your program interviews and also email your Program Manager to bring their attention to your extenuating circumstance. Your personal essay is an opportunity to communicate with the JSGMESB-please use this to your advantage! *Important: If you are listing redeferred (unfunded) training as your first choice, when there are AD locations authorized by the HPERB, you must indicate your reasons for having redeferred as your first choice. If there are extenuating circumstances, you must provide source documentation as mentioned above in the examples.* 

### **Second Choice Form**

This form must be filled out by <u>all</u> applicants and requires the applicant's signature. Second choice refers to specialty choice only (e.g. your first choice is ophthalmology but, if not selected, your second choice is general surgery). The second choice start date and training preferences are indicated on the second choice form. If you list a second choice for specialty, please ensure you also fill out items 3-5 on the second choice form. If you do not have a second choice for a specialty, just check item 1 on the form ("I do NOT have a second choice...") and print/sign your name at the bottom of the form. Completion is mandatory.

### **Weight Statement**

All applicants <u>must</u> be weighed between the dates of <u>1 July-14 September 2014</u> and not before. If you exceed AF standards due to a medical condition, you must include an explanation on the form (i.e., pregnancy due to deliver month-year). If you exceed the AF weight standard, you must include your body fat percentage or measurements so that body fat percentage can be determined on the bottom of the form in the space allotted. The statement <u>must</u> be <u>signed</u> and <u>dated</u> by an authorized medical representative or medical personnel at your training facility or your personal physician. Please refer to the following website for the Air Force weight and body fat standards so that you can determine whether a body fat percentage is required: <a href="http://usmilitary.about.com/od/airforcejoin/a/afmaxweight.htm">http://usmilitary.about.com/od/airforcejoin/a/afmaxweight.htm</a>

### **Statement of Understanding**

Read, sign, and date this page. Signature is mandatory

### **Reserve Component Health Risk Assessment (RCHRA)**

The Reserve Component Health Risk Assessment form is posted along with the application package on our website for downloading by the applicant and is to be completed by a fully licensed M.D. or D.O. (preferably the applicant's Primary Care Provider). Fellow interns, residents, family members (who are physicians), nor self-treatment will meet this requirement. Once completed, it must be emailed to Physician Education (do not upload into MODS) no later than 14 September 2014 for submission to HQ AETC/SG for evaluation. In some instances, HQ AETC/SG may need additional medical documentation in order to make a final determination. Submitting this documentation in a timely manner is important. Medical clearance by HQ AETC/SG is a requirement before your application can been seen by the Board so please plan accordingly, as there are no exceptions to this policy.

Note: If your medical status has changed between **Sept 2013 and Sept 2014**, you must attach additional medical documentation addressing health changes to RCHRA and submit prior to the **14 September 2014** 

deadline in order to expedite the medical review process. Again, do not upload this information into MODS-scan and email it to Physician Education.

Completion of the RCHRA and submission to Physician Education is not applicable to physicians sponsored through Financial Assistance Program. The requirement still exists for all applicants meeting the JSGMESB; therefore, FAP participants are not exempt. Because the RCHRA is an AFIT annual requirement, AFIT will coordinate with FAP recipients in obtaining the RCHRA starting in June/July of 2014 and submit results to Physician Education in order for applicants to meet the Board.

### **Education Summary**

This form has been omitted for deferred-applications. If it appears on the automated GME Checklist email you receive from Physician Education, please disregard it. This form is only required for 4<sup>th</sup> year medical students.

### **Current Program Director Recommendation Form**

(applicable only if currently in training)

Applicants presently in a GME training program must request their current Program Director to submit the DoD Program Director Recommendation Form, <u>not a letter</u>, to include the dates of training and an evaluation of performance. This form is found in Section 3 of these instructions. For individuals applying for fellowship training that are currently in a pre-select specialty (e.g. Urology, Radiology, Anesthesia, Neurology, Ophthalmology, etc.) that required a separate internship year, then a recommendation will also be required from the Program Director from the internship year. <u>The Program Director Recommendation Form(s) is/are uploaded directly from the Program Director into MODS (mail or fax-**not** via email). This form MUST be typed. Handwritten forms will be returned. Please note, do not submit a letter of recommendation from the Program Director in addition to or in lieu of the Program Director Recommendation Form. This form must be current, and include ALL periods of training.</u>

Applicants who are currently training in a civilian program: Please email the Program Director Recommendation Form to your Program Director to complete and have them give it back to you so that you can upload it into MODS. This form is located in section 3 (Application Documents) toward the end of these instructions. This form MUST be typed. Handwritten forms will be returned.

### **Previous Program Director Recommendation Form**

(applicable if <u>previously</u> in training)

Applicants previously enrolled in any GME program (military or civilian) must request any AND all previous Program Director(s), including fellowships, to submit a DoD Program Director Recommendation Form. For example, if an individual previously trained in Family Medicine, a recommendation form will be needed from that program. For individuals that trained in a specialty that had a separate internship year (e.g. Urology, Radiology, Anesthesia, Neurology, Ophthalmology, etc.), then a recommendation will be needed from each Program Director (e.g. the Transitional Year Program Director and the Ophthalmology Program Director.

It is very common that the previous Program Director is no longer at the training institution (AD or civilian). If this applies, please have the <u>current</u> Program Director of <u>that</u> program fill out the form based on a review of your training file which is kept there. They are familiar with completing various training verification forms. The ACGME requires training files be maintained for 50 years. If the applicant is unable to locate the new Program Director, he/she should request a recommendation from the Director of Medical Education at the facility where the training was conducted. This document is required whether or not the training program was completed (i.e. if you resigned or were terminated) and must address the inclusive dates of training and an evaluation of performance. This form is submitted back to the applicant and it is the applicant's responsibility to upload this form into MODS. This form MUST be typed. Handwritten forms will be returned. It is the

applicant's responsibility to clearly communicate that the form must be typed. Please note, do not submit a personal letter of recommendation from the Program Director in addition to or in lieu of the Program Director Recommendation Form.

- a. Applicants *who trained in an AF training program*: Physician Education will provide the required blank form to the current AF Program Directors. The applicant is required to make contact with the current Program Director and request the form be filled out and uploaded into MODS.
- b. Applicants who trained in a civilian program: If the automated "GME Checklist" email you receive from Physician Education verifying receipt of your application package reports we still need your Program Director Recommendation form, please email the Program Director Recommendation Form to your Program Director to complete. The Program Director should forward the signed form <u>directly</u> back to you so that you can upload it into MODS. This form is located in Section 3 (Application Documents) toward the end of these instructions. This form MUST be typed.

### **Program Director/Consultant Interview Sheets**

- a. This form is <u>not included</u> with this package. It will be forwarded to AF Program Directors/Consultants. The intent of the interview sheet is for Program Directors to assess the applicant's qualifications for selection in the requested specialty. Completion of this form is mandatory for all JSGMESB applicants. Lack of an interview will likely result in non-selection of the specialty regardless of the applicant pool. Applicants are required to schedule a personal or telephonic interview with the <u>Program Director at the applicant's first AD training location choice</u>. In cases where an applicant is applying for an HPERB approved specialty for which there is no AF Program, the applicant will be required to interview with the AF specialty consultant. This interview requirement includes applicants requesting <u>Civilian Sponsored or Deferred status</u> as their first choice. However, applicants may interview with multiple programs and the requirement for the interview form will be met when Physician Education receives any interview form from any of the AF locations you interview.
  - 1. Applicants must list every AD location in which the HPERB has authorized positions for that specialty. This is a requirement even if the applicant only desires civilian sponsorship or redeferred training. The JSGMESB application will be returned if this requirement is not met.
  - 2. Applicants applying for an <u>HPERB approved</u> Army/Navy Program (as a first location preference), will be required to interview with the respective Program Director from that service.
- b. Program Directors/Consultants are not provided a list of applicants to their programs until **1 October**. Therefore, it is the applicant's responsibility to make initial contact with the appropriate Program Director (or Consultant when appropriate) to request an interview. It is highly recommended to schedule this interview as soon as possible. You must interview no later than **10 October 2014** to ensure that the Interview Sheet can be completed and uploaded into MODS by the Program Director/Consultant NLT **15 October 2014**.
- c. Applicants are required to send a copy of their two-page DoD Application (in Section 3 "DPANE Form 4117") and CV to <u>each</u> AF Program Director/Consultant in the specialty for which he/she is applying. Providing the 2-page DOD application and CV is extremely important, even if applicants desire to train in a deferred/civilian location. Keep in mind; the Program Directors/Consultants are the JSGMESB members who will be selecting individuals for specialty training and location. **Note:** No additional documentation other than these two documents may be provided to (or requested by) Program Directors/Consultants. Do not send other application documents to them, only the two required items. Program Directors/Consultants are aware of this JSGMESB restriction.
- d. Contact information for the Program Directors/Consultants is available at:

http://www.afms.af.mil/physicianeducationbranch/index.asp If the applicant has made several attempts to contact the appropriate person and is having difficulty, please contact Physician Education for assistance.

### **Section 3: JSGMESB Application Documents**

Note: You must upload into MODS the JSGMESB application with all supporting documents as soon as possible but no later than the deadline of **14 September.** Once the documents are uploaded into MODS, your Physician Education Program Manager can begin processing your application and email a GME checklist to you annotating receipt of your documents. You must complete all the required forms in this section.

- 1. Remember to print all application documents on <u>one side</u> only. Documents printed on front/back or handwritten will be returned.
- 2. Ensure your name is listed in the box at the top of the second page of the DoD Application for GME (DPANE Form 4117).
- 3. Please do not alter or delete sections of the CV. All sections are required, even if it does not apply to you. If a section, such as military spouse, does not apply, please enter N/A.

De	ferred
$D_{\mathcal{C}}$	<i>j</i> crrcu

#### DEPARTMENT OF DEFENSE APPLICATION FOR GRADUATE MEDICAL EDUCATION (DPANE Form 4117) THIS FORM IS AFFECTED BY THE PRIVACY ACT OF 1974 AUTHORITY: 10 USC 3012 2. PRINCIPAL PURPOSE(S): To compile information necessary to evaluate an application for military graduate medical education (GME) training. 3. ROUTINE USES: To evaluate application for professional training in military and civilian facilities (Medical Corps officers only). MANDATORY OR VOLUNTARY DISCLOSURE: Disclosure of requested information is voluntary, however, without it, consideration for GME cannot be accomplished and GME may 1. NAME (Last, First, MI) 2. GRADE 3. Last Four of SSN 4. CURRENT SPECIALTY 5. SERVICE Air Force ☐ Army ☐ Navy 6. HOME/APO ADDRESS (ZIP+4) 7a. HOME PHONE 8. COMPLETE DUTY ADDRESS 9. DUTY PHONE (include area code) COMM: DSN: 7b. CELL PHONE Pager: Fax: **10. EMAIL** (*Max 3 – Include Duty/Personal/Deployed if applicable*): 11. CURRENT STATUS 12. SPECIALTY OR SUBSPECIALTY REQUESTED ☐ MEDICAL STUDENT ☐ HPSP ☐ROTC/Educational Delay Choice (ONLY one): ☐ ACTIVE DUTY **PGY1** (**INTERN**) ☐ ACTIVE DUTY RESIDENT ☐ ACTIVE DUTY FELLOW 13. START DATE REQUESTED 14. PROGRAM LENGTH ☐ ACTIVE DUTY FIELD/OPERATIONAL STAFF ☐ DEFERRED/REDEF/FAP (Until Month/Year) ) YEAR (S) ☐ OTHER (Specify) 15. TRAINING a. Undergraduate School GRADUATION YEAR Major Approximate GPA Honors b. Medical School Name GRADUATION YEAR Approximate GPA Class Ranking School Does Not Rank Academic Honors c. PGY1/Specialty GRADUATION YEAR Location d. Residency/Specialty Location GRADUATION YEAR GRADUATION YEAR e. Fellowship/Specialty Location 16. LIST OF PGY1 ROTATIONS AND TIME SPENT IN EACH: (Fill out only if you are applying for a residency and did not complete a categorical PGY1 in that specialty. Complete this section if you have ONLY completed an internship year. Not to be completed if applying for a fellowship) 17. SPECIALTY BOARD CERTIFICATION TYES NO If yes, indicate specialty & certification date: 18. MEDICAL LICENSING EXAMINATIONS (Copies of Steps/Levels 1-3 must be submitted with this application) Check One **Check One** Step/Level 1 ☐ Passed ☐ Failed Year taken\_ ☐ Not Taken

FLEX

Date

☐ Not Taken

☐ Not Taken

NBME/USMLE □

NBOME/COMLEX □

☐ Passed ☐ Failed Year taken\_

☐ Passed ☐ Failed Year taken\_

Step/Level 2

Step/Level 3

NA	AME (Last, First, MI)				. J
20	20. POST-PGY1 EXPERIENCE (Last three (3) assignments only)				
Dι	ty Station	Duty Title			Dates (From – To)
		-			
21	Participation in federally funded programs (check all that	at apply):			
	HPSP ROTC/Educational delay US	UHS	Milita	ry Academy Dire	ect Accession
	I possess a current, valid and unrestricted medical licens	se YES NO (If yes,	you mus	t submit a copy of license i	including the expiration date
Wi	th this application.)				
23.	TRAINING PREFERENCES	Rank order your preferences b	y listing	1, 2, 3, etc. ( <b>Maximum of 6</b> pr	references)
	AIR FORCE (Must rank all HPERB locations f	for your specialty)		ARM	Y
	David Grant Medical Center, Travis AFB, CA		Eis	enhower Army Medical Center, Fo	ort Gordon, GA
	USAF Regional Hospital, Eglin AFB, FL		Ma	digan Army Medical Center, Taco	ma, WA
	Erhling Bergquist Clinic, Offutt AFB/University of Nebraska, Omaha	NE	Tri	pler Army Medical Center, Honolu	ılu, HI
	Keesler Medical Center, Keesler AFB, MS		1		
	Mike O'Callaghan Federal Hospital, Nellis AFB, NV				
	NCC- The National Capital Consortium (Walter Reed National Militar	v Medical Center). Bethesda, MD	1		
	Includes NCC, Fort Belvoir Community Hospital and USUHS	,,			
			Wi	lliam Beaumont Army Medical Ce	nter, El Paso, TX
	SAUSHEC (Wilford Hall Ambulatory Surgical Center/San Antonio M	ilitary Medical Center)			
Scott AFB/St. Louis School of Medicine (Belleville) Program, Belleville, IL		Wo	omack Army Medical Center, Fort	Bragg, NC	
Wright-Patterson Medical Center/Wright State Univ, Dayton, OH		Dai	rnall Army Community Hospital, F	Fort Hood, TX	
	USAFSAM (RAM – Wright Patterson AFB, OH / Hyperbaric - Lackla	and AFB, TX)	Ma	rtin Army Community Hospital, Fe	ort Benning, GA
	Civilian Sponsored		Kel	ller Army Community Hospital, W	est Point, NY
	Civilian Deferred/Redeferred (Non-funded); rank even if not offered or	on HPERB if you are interested			·
	· · · · · ·	·			
	NAVY			OTH	HER
	Naval Medical Center, Portsmouth, VA		Uni	iformed Services University of the	Health Sciences (Non-Clinical)
	Naval Medical Center, San Diego, CA		Wa	lter Reed Army Institute of Resear	ch
	Naval Hospital Bremerton, WA				
	Naval Hospital, Camp Lejeune, NC  Naval Hospital, Camp Pendleton, CA		1		
	Naval Hospital, Jacksonville, FL				
	Naval Hospital, Pensacola, FL				
	Naval Aerospace Medical Institute, Pensacola, FL				
for An As An pro Ser of	I understand that the GME training received is directed toward which I have applied. It is understood that I must enter a programerican Medical Association or if applicable (generally PGY1 lesociation. I understand that I must also meet the requirements to the properties of Medical Specialties. For those subspecialties, we gram approved by the appropriate specialty society. I understand vice Regulations and DoD Directives and that I will be made as whis application and I affirm that the information given in this appearance of the properties of th	am that is accredited and listed is vel of GME) by the most currer of sit for the certification examinated which do not lead to board certiful d that my service obligation followers of my exact obligation priority polication is true and complete to	n good state Yearbook attoo by the ication not owing GM report to entering the best of the	anding in the most current GM ok and Directory published by the respective specialty board vor possess accreditation status, ME training will be computed ng GME training. I acknowle	IE Directory published by the the American Osteopathic which is recognized by the training must be received in a in accordance with applicable dge that I understand the contents
AF	PLICANT SIGNATURE :	D	ATE:		

### Curriculum Vitae MM/DD/YYYY

### PERSONAL DATA

Other Postgraduate:

Full Name: Corps: Medic	cal		Grade: Service: Air Force
Current Home	Address:		
Home Phone: Cell Phone:		Email (personal):	
Duty Assigni	ment Address:		
Phone:	DSN: Commercial: Pager:		Ext:
Email (duty):			
Birth Date: State of Birth	ı:	City of Birth: Country of Birth:	
Spouse: (Cor	nplete the following	only if your spouse is active du	ty; otherwise indicate N/A)
Full Name: Service: Duty Assign	ment:	Corps: Other:	
EDUCATION Undergradua Medical Scho	te:		

Degree: School:
Graduation Date:
Degree:
School:
Graduation Date:
Military Training Courses:
Other Military Courses
PROFESSIONAL TRAINING AND EXPERIENCE:
PGY1 Specialty: Location:
Completion Date:
Residency Specialty: Location:
Completion Date:
Fellowship Specialty: Location:
Completion Date:
PRIOR MILITARY SERVICE (Complete this section if you have had prior active duty military service, to include a staff physician assignment within another branch of service or prior service before attending medical school. List in chronological order starting with most recent service)
Type of Service:
Rank: Corps (commissioned Service only):
Description of Service (describe the type of duties performed):
Dates of Service: TO
Type of Service: Rank:
Corps (commissioned Service only): Description of Service (describe the type of duties performed):
Dates of Service: TO

Type of Service: Rank: Corps (commissioned Service only): Description of Service (describe the type of duties performed):
Dates of Service: TO
CIVILIAN WORK HISTORY/MILITARY ASSIGNMENT HISTORY (Chronological order starting with current assignment): Duty Title: Duty Location:
Dates of Assignment: TO Present
Duty Title: Duty Location:
Dates of Assignment: TO
Duty Title: Duty Location:
Dates of Assignment: TO
Duty Title: Duty Location:
Dates of Assignment: TO
Duty Title: Duty Location:
Dates of Assignment: TO
LICENSURE AND SPECIALTY CERTIFICATION: Current Unrestricted State License: I possess a current unrestricted license: Yes No License Number: State: Expiration Date:
Board Certification: Board Certified: Ves No.

Specialty: Certification Date (if pending, indicate status):

HONORS AND RECOGNITION/COMMUNITY INVOLVEMENT: Undergraduate:
Medical: Military:
ACADEMIC APPOINTMENTS:
PROFESSIONAL SOCIETIES: (must indicate in what capacity completed; i.e. medical student, intern/resident, hous taff officer or field staff officer)

### **PUBLICATIONS/RESEARCH:**

(must indicate in what capacity completed; i.e. medical student, intern/resident, house staff officer or field staff officer) For publications, list all authors and use standard format as would be seen in a medical journal.

### **Step/Level 3 Intention Form**

(Required for current PGY1 applicants who have not taken/received Step/Level 3 scores)

- 1. Physicians who are currently completing their PGY1 year must have <u>scheduled</u> Step/Level 3 prior to the 2014 JSGMESB convening. Step/Level 3 must be taken prior no later than **15 Mar 2015**. If selected for training, the applicants training offer and approval to enter GME are <u>contingent</u> on passing and obtaining the results of the Step/Level 3 by **30 Apr 2015**. Plan accordingly as there are no exceptions to this requirement. Your assignment will be initiated upon Physician Education's receipt of the passing Step/Level 3 score.
- 2. Allow four to eight weeks to receive the Step/Level 3 results. Once you receive the Step/Level 3 scores, you are responsible for providing a copy to this office NLT **30 April 2015**.
- 3. Include this Intention Form as a part of your JSGMESB application which must be uploaded into MODS no later than 14 September 2014.
- 4. This letter requires signature from your current Program Director and Director of Medical Education (DME). A copy of the original must be uploaded into MODS as a part of your JSGMESB application package which is due no later than 14 September 2014. This letter MUST accompany your application to the JSGMESB.

Member Acknowledgement	
I,, am scheduled to tak	te USMLE/COMLEX Step/Level 3 on
(Printed Name)	(Date)
I certify the above statement to be true and accurate.	
•	(Applicant Signature)
Program Director Acknowledgement  I have reviewed with the applicant his/her intentions for tal AFPC Physician Education is alerted of any changes in the	king Step/Level 3 and will monitor completion. I will ensure above test date.
(Program Director Printed Name and Signature)	(Date)
Director of Medical Education Acknowledgement  I have been made aware of the requirement for Step/Level applicant's intent to take USMLE/COMLEX Step/Level 3	on ( <i>Date</i> ).
(Director of Medical Education Printed Name and Signat	ure) (Date)

Please maintain a copy in the applicant's local GME file and provide the original back to the applicant.

### Second Choice Form

This form is required by all applicants, whether or not an applicant has a second choice for <u>specialty</u> (Example: first specialty choice is Internal Medicine and second specialty choice is Family Medicine). If an applicant has only one choice for specialty but wishes to list more than one placement preference, list this information on the second page of the two-page DoD application (DPANE Form 4117).

(CHECK ONE)		
1 <b>I do</b> have a second	d choice for specialty/subspecialty training. (Co	omplete items 2-5.)
I do NOT have a page)	second choice for specialty/subspecialty training	g. ( <u>Do not complete sections 2-5</u> . Sign/date bottom of
		wing as my <b>second</b> choice preference. I have ranked applicable if I am <b>NOT</b> selected for my first choice).
3. SECOND CHOICE TRA	INING REQUESTED	
Specialty		<del></del>
Program Length	year(s) Start Date	
4. TRAINING PREFEREN	CES: (Please rank order preference desired, with	h "1" being your first choice).
☐ David Grant	☐ Scott	☐ Army
— □ Eglin	Wright Patterson	☐ Navy
☐ Ehrling Bergquist	☐ NCC (NCC, Ft Belvoir, USUHS)	☐ Deferred/Redeferred
<ul><li>☐ Keesler</li><li>☐ Nellis</li></ul>	USAFSAM (RAM/Hyperbaric only)	☐ Civilian Sponsored
☐ SAUSHEC		•
	ected as an alternate for your first choice, your a est. Please indicate below your preference regar	application will <b>NOT</b> proceed for review by your rding your second choice/alternate status.
	r my first choice. I understand that if chosen as it to my second choice for consideration.	an alternate, my
Do not keep me for an alte consideration.	ernate position, send my application to my secon	d choice for
NAME	(LAST, FIRST, MI)	RANK
	(LAS1, FIRS1, MI)	
SIGNATURE	D	ATE

### 2014 Graduate Medical Education – Weight Statement

Must be completed by all deferred applicants

# Must be completed between 1 July-14 September 2014 and submitted with application package no later than 14 September 2014 to Physician Education

This information is <u>NOT</u> self-reporting. The statement must be signed and dated by a medical representative at your training facility, your personal physician or <u>OTHER</u> medical personnel <u>OTHER THAN YOURSELF</u>. Your application will NOT be completed without this certification.

PRINTED NAME OF APPLICANT:				
SSAN:				
HEIGHT (INCHES):	WEIGHT (POUNDS):			
NAME:	TITLE, WORK PHONE:			
SIGNATURE OF MEDICAL REPRESENTATIVE:				
	DATE:			
*Body fat percentage, if required (see website below), is:				
http://usmilitary.about.com/od/airforcejoin/a/afmaxweight.htm  THIS FORM IS AFFECTED BY THE PRIVACY ACT OF 1974				

- 1. AUTHORITY: 10 USC 3012.
- 2. PRINCIPAL PURPOSE(S): To compile information necessary to evaluate an application for military graduate medical education (GME) training.
- 3. ROUTINE USES: To evaluate application for professional training in military and civilian facilities (Medical Corps officers only).
- MANDATORY OR VOLUNTARY DISCLOSURE: Disclosure of requested information is voluntary, however, without it, consideration for GME cannot be accomplished and GME may not be assured.

### 2014 Graduate Medical Education - Statement of Understanding (DEFERRED)

NAME (PRINT)	
` ′	

- a) Individuals applying for active duty (AD) training in other than Air Force (AF) medical facilities will be considered for AF or other DoD training programs before being considered for civilian sponsorship. AF members cannot give final acceptance to a program offer until official written notification of final selection for that program is provided by the AF. AF members choosing civilian programs with rotations away from the primary teaching facility may be required to participate in these rotations at their own expense.
- b) Deferred physician who are NOT selected for continued training will be required to enter AD at the end of their current training program to begin serving their active duty obligation. They may apply to subsequent GME selection boards for further graduate medical education though selection is NOT assured.
- c) I understand if I am selected for and subsequently enter a graduate medical education (GME) program under AF sponsorship, in either a military or civilian facility, I will incur an active duty service commitment (ADSC) for education and training. This ADSC is computed in accordance with AFI 36-2107, Active Duty Service Commitments, in effect at the time my training program will commence. I will receive written notification of my selection status and projected ADSC following completion of the JSGMESB. I further understand I have a personal responsibility to review and verify my ADSC in accordance with applicable AF Instructions.
- d) I understand and specifically acknowledge that I must possess a current, valid, unrestricted state medical license upon completion of my second postgraduate year.
- e) If I am in my first post graduate year, I will take USMLE/COMLEX Step/Level 3 no later than **15 March 2015**. If selected for training, I must complete all academic requirements of my current internship program, before I will be authorized release to new training program. I understand that my selection for GME is contingent upon providing Physician Education a passing score by **30 April 2015**.
- f) If I am in my PGY-2 year, I will include Step/Level 3 results in my JSGMESB application package by the **14 September 2014** deadline.
- g) In accordance with AFI 44-102, Section 1.9, I understand that I am prohibited from pursuing off-duty employment (i.e. moonlighting) while in training. Physician Education has the authority to remove me from training in the event off-duty employment occurs.
- h) If I am selected for training in civilian sponsored status, I will remain on AD under the command/control of AFIT. I am prohibited from receiving a salary, stipend, or other monetary awards, other than my AD entitlements.
- i) I understand, if I am selected by the JSGMESB, I will be required to work in a clinical capacity (in the specialty to which I trained) for at least two years after GME completion, unless the AF/SG waives this requirement due to the needs of the AF mission.
- j) I understand I will only enter the civilian match for training (to include length of training) as approved by the JSGMESB.
- k) If I have any questions regarding special pays and if the ADSC associated with this GME training will affect my pay, I will contact the Medical Special Pay Branch at 210-565-2377. If selected for GME, my training ADSC will be calculated by Physician Education.

SIGNATURE	DATE

### PROGRAM DIRECTOR RECOMMENDATION FORM

This form must be completed by the applicant's most recent program director (or current program director) to provide an appraisal of the applicant's performance which will be used in the selection for further GME training.

1. APPLICANT'S NAME	2. Last 4 SSN		3. SPECIALTY CHOICE						
Last:									
First, MI:			5. TRAINING PROGRAM (Circle accreditation status)						
4. PROGRAM DIRECTOR'S NAME/PHONI	E NUMBER		5. TRA	AININ(	3 PROGI	KAM (Ci	rcie accre	ditation	status)
Last, First			SPEC	IALTY	Y:				
MI Phone #			ACGN	Æ					
rhohe #			AMERICAN OSTEOPATHIC ASSOCIATION DUAL ACCREDITATION						
6. LEVEL OF TRAINING BEING EVALUAT	ГЕО								
	RN (Year Only)		RESIDENCY FELLOWSHIP						
7. DATES OF TRAINING EVALUATED		8. L	OCATIO	ON OI	TRAIN	ING			
	mm/dd/yyyy								
9. COMPARE THIS INDIVIDUAL'S PERFO		THE	R TRAI			PROG	RAM		
Top 25% Mid-	dle 50%			Botto	om 25%				
group in each category									
10. CORE COMPETENCIES (scores 2 or lo	ess in any compe	tency a	area mu	st be a	ddressed	l in box	12)		
Competency F	Rating (inferior	)	2		(average	)	4		(superior)
Patient			2		3		T -		5
Medical Know									
Practice-based Learning and Improve	_								
Interpersonal and Communication S									
Profession									
Systems-based Pra	actice:								
11. WAS THE TRAINEE EVER ON ACADE	MIC PROBATIO	ON/EX	TENTI	ON?		Yes	[	N	Го
12. Provide specific comments on this individu		e inclu	ding an	y signi	ficant pr	oblems	noted du	iring tra	aining or
reservations about qualification for further tra	ining.								
13. Based upon my assessment of this individu	al's performance	2,							
I highly recommend her/him for further GME									
I recommend her/him for further GME									
I do not recommend her/him for further GME									
14. SIGNATURE OF PROGRAM DIRECTO	R	15. l	DATE	_			_		

Updated Jun 2013